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#### Form **990-PF**

### **Return of Private Foundation**

# or Section 4947(a)(1) Nonexempt Charitable Trust

OMB No 1545-0052

2009 Treated as a Private Foundation Department of the Treasury Note. The foundation may be able to use a copy of this return to satisfy state reporting requirements. Internal Revenue Service For calendar year 2009, or tax year beginning and ending Final return G Check all that apply: Initial return Initial return of a former public charity X Name change Amended return Address change Name of foundation A Employer identification number Use the IRS THE DUNKIN' DONUTS & BASKIN-ROBBINS label. Otherwise, COMMUNITY FOUNDATION, INC. 26-0593784 Number and street (or P O box number if mail is not delivered to street address) Room/suite B Telephone number print or type. 781-737-3821 130 ROYALL STREET See Specific City or town, state, and ZIP code C If exemption application is pending, check here Instructions. CANTON, MA 02021 1. Foreign organizations, check here Foreign organizations meeting the 85% test, check here and attach computation X Section 501(c)(3) exempt private foundation H Check type of organization: Section 4947(a)(1) nonexempt charitable trust Other taxable private foundation E If private foundation status was terminated. X Accrual I Fair market value of all assets at end of year J Accounting method: under section 507(b)(1)(A), check here Other (specify) (from Part II, col (c), line 16) F If the foundation is in a 60-month termination. 746. (Part I, column (d) must be on cash basis) ▶\$ ,511 under section 507(b)(1)(B), check here Part I | Analysis of Revenue and Expenses (d) Disbursements (c) Adjusted net (a) Revenue and (b) Net investment (The total of amounts in columns (b), (c), and (d) may not necessarily equal the amounts in column (a) ) charitable purposes (cash basis only) expenses per books income income 865,245 N/A Contributions, gifts, grants, etc., received 2 Check I if the foundation is not required to attach Sch. B Interest on savings and temporary cash investments 3,398. 3,398. STATEMENT Dividends and interest from securities 5a Gross rents b Net rental income or (loss) 6a Net gain or (loss) from sale of assets not on line 10 b Gross sales price for all assets on line 6a 0. 7 Capital gain net income (from Part IV, line 2) 8 Net short-term capital gain Income modifications 10a Gross sales less returns and allowances b Less Cost of goods sold 💯 c Gross profit or (loss) 1 Other income 868,643. 3.398 Total. Add lines 1 through 11 0. 0. Compensation of officers, directors, trustees, etc 50,000. 14 Other employee salaries and wages 15 Pension plans, employee benefits 35,000. 0. <u>40,500.</u> STMT 2 16a Legal fees 15,190. STMT 3 12,690. 0. b Accounting fees STMT 4 18,000. 18,000 ο. c Other professional fees 17 Interest 18 Taxes 19 Depreciation and depletion 20 Occupancy 16,175 0. 16,175. 21 Travel, conferences, and meetings 22 Printing and publications STMT 5 320,741 0 274,193. 23 Other expenses 24 Total operating and administrative 0 452,606 364,058. expenses. Add lines 13 through 23 554,153. 754,250 25 Contributions, gifts, grants paid (3039) 26 Total expenses and disbursements. 918,211. ,206,856 Add lines 24 and 25 27 Subtract line 26 from line 12: -338,213a Excess of revenue over expenses and disbursements 3,398 b Net investment income (if negative, enter -0-) N/A c Adjusted net income (if negative, enter -0-)

LHA For Privacy Act and Paperwork Reduction Act Notice, see the instructions.

Form 9	THE DUNKIN' DONUTS & BAS 190-PF(2009) COMMUNITY FOUNDATION, IN	C.		0593784 Page 2
Par	Balance Sheets Attached schedules and amounts in the description column should be for end-of-year amounts only	Beginning of year	End of	
		(a) Book Value	(b) Book Value	(c) Fair Market Value
1	Cash - non-interest-bearing	815,526.	1,287,930.	1,287,930.
2				
3	Accounts receivable >			
	Less: allowance for doubtful accounts ▶			
4	Pledges receivable ► 213,408.		242 422	040 400
	Less: allowance for doubtful accounts ▶	794,170.	213,408.	213,408.
5	_ · · · · · · · · · · · · - ·			<u>-</u>
6	,			
	disqualified persons			<del></del>
7	Other notes and loans receivable			
	Less: allowance for doubtful accounts			
र्ह्स   8	Inventories for sale or use			
Assets	F	1,618.	_6,658.	6,658.
<b>▼</b>  10	a Investments - U.S. and state government obligations			
	b Investments - corporate stock			
	c Investments - corporate bonds			
11	Investments - land, buildings, and equipment. basis			
	Less accumulated depreciation			
12	! Investments - mortgage loans			
13	Investments - other			
14	Land, buildings, and equipment; basis ►			
	Less accumulated depreciation			
15	Other assets (describe ► STATEMENT 6)	0.	3,750.	3,750.
1				
16	Total assets (to be completed by all filers)	1,611,314.	1,511,746.	1,511,746.
17		28,080.	73,942.	
18	Grants payable	38,717.	231,500.	
g   19	Deferred revenue			
Liabilities	Loans from officers, directors, trustees, and other disqualified persons			
윤   21	Mortgages and other notes payable			
<b>-</b>  22	Other liabilities (describe ▶)			
23	Total liabilities (add lines 17 through 22)	66,797.	305,442.	
	Foundations that follow SFAS 117, check here			
<b>(A</b>	and complete lines 24 through 26 and lines 30 and 31			
ğ 24	Unrestricted	750,347.	992,896.	
[ 25	Temporarily restricted	794,170.	213,408.	
<u>6</u> 26	Permanently restricted			
틸	Foundations that do not follow SFAS 117, check here			
띤	and complete lines 27 through 31.			
° 27	Capital stock, trust principal, or current funds			
8 28	B Paid-in or capital surplus, or land, bldg., and equipment fund			
<b>₹</b>  29	Retained earnings, accumulated income, endowment, or other funds			
Net Assets or Fund Balances	Total net assets or fund balances	1,544,517.	1,206,304.	
3	Total liabilities and net assets/fund balances	1,611,314.	1,511,746.	
Par	t III Analysis of Changes in Net Assets or Fund Ba	lances	. —	
1 To	tal net assets or fund balances at beginning of year - Part II, column (a), line 3	0		
(m	ust agree with end-of-year figure reported on prior year's return)		1	1,544,517.
<b>2</b> En	ter amount from Part I, line 27a		2	-338,213.
	ner increases not included in line 2 (itemize)		3	0.
4 Ad	d lines 1, 2, and 3		4	1,206,304.

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5 Decreases not included in line 2 (itemize)

6 Total net assets or fund balances at end of year (line 4 minus line 5) - Part II, column (b), line 30

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		nd(s) of property sold (e.g or common stock, 200 sh			( <b>b</b> )	How acq - Purcha - Donat	ured ase ion	(c) Date acquired (mo., day, yr.)	(d) Date sold (mo., day, yr.)
a •	_				1				
b NC	NE				┷			· -·	
<u>C</u>					<u> </u>				
<u>d</u>					+			<del>-</del>	
<u>e</u>	(4) [	Nancasiation allowed	(=) (00	t or other book				(h) Corp or (loo	
(e) Gross sales price	(1)	Depreciation allowed (or allowable)		st or other basis xpense of sale				(h) Gain or (los (e) plus (f) minus	
<u>a</u>				<del></del>					
<u>b</u>	<del>                                     </del>		ļ						
<u>c</u>	<del>                                     </del>	<del></del>					<u> </u>		
<u>d</u>								<del></del>	
Complete only for assets show	Ing gain in i	column (h) and owned by	the foundation	on 12/31/69	-		/11	Counc (Col. (h) gas	n minus
Complete only for assets snow	T	j) Adjusted basis		cess of col. (i)	-			Gains (Col. (h) gai (k), but not less th	an -0-) <b>or</b>
(i) F.M.V. as of 12/31/69	,	as of 12/31/69		col. (j), if any				Losses (from col.	(h))
a		<del></del> · · .	<b> </b>	<del> :</del>					<del> </del>
<u>u                                     </u>	1								
C _							<u>-</u>		
d		<del> </del>							
e	$\mathbb{L}_{-}$								
Capital gain net income or (net o	apital loss)	If gain, also ente	r ın Part I, line I- ın Part I, line	7	<b>\_</b>	2			
	•	`		•	,				
Net short-term capital gain or (Io If gain, also enter in Part I, line 8 If (loss), enter -0- in Part I, line 8	, column (d		iiu (o).		}	2			
Part V Qualification l	Jnder S	ection 4940(e) for	Reduced	Tax on Ne	t Inv	estm	ent inc	ome	
/as the foundation liable for the se "Yes," the foundation does not qui Enter the appropriate amount in	alify under	section 4940(e). Do not co	omplete this pa	rt.					Yes X No
(a) Base period years Calendar year (or tax year beginr	ning in)	<b>(b)</b> Adjusted qualifying dis	stributions	Net value of n	(c) oncha		se assets	Distr (col. (b) d	(d) ibution ratio ivided by col. (c))
2008		1,55	3,484.		1	,181	L,069	•	1.31532
2007		8	<u>32,200.</u>			884	1,212		.09296
2006									
2005							_	<del></del>	
2004	ļ					<del></del>			
. Total of her discount (d)									1 40020
Total of line 1, column (d)	Swaar har	ea narind - divide the total	on line 2 hv E	or by the number	r of w	aare		2	1.40828
Average distribution ratio for the the foundation has been in exist	-		on mie z by 5,	or by the number	a UIYE	al S		3	.97168
LINE 3 BASED OF			OD OF	1.44931	50	YEAF	RS	-	
Enter the net value of noncharita				T.44731	30	1 1111	10	4	1,021,860
Cittor the net value of nonemark	1010 030 03.	3013 101 E003 II 0111 T art X,	11110 0						1/021/000
Multiply line 4 by line 3								5	992,930
Enter 1% of net investment inco	me (1% of	Part I, line 27b)						6	34
Add lines 5 and 6								7	992,964
B Enter qualifying distributions fro	m Part XII	line 4						8	918,211
If line 8 is equal to or greater that See the Part VI instructions.			e 1b, and comp	olete that part us	ng a 1	% tax ra	ite.	<u> </u>	
See the Part VI instructions.							-	· · · · ·	Form <b>990-PF</b> (2009

THE DUNKIN' DONUTS & BASKIN-ROBBINS Form 990-PF (2009) COMMUNITY FOUNDATION. 26-0593784 INC. Page 4 Excise Tax Based on Investment Income (Section 4940(a), 4940(b), 4940(e), or 4948 - see instructions) Part VI 1a Exempt operating foundations described in section 4940(d)(2), check here and enter "N/A" on line 1. Date of ruling or determination letter: (attach copy of letter if necessary-see instructions) 68. b Domestie foundations that meet the section 4940(e) requirements in Part V, check here 🕨 🔲 and enter 1% of Part I, line 27b c All other domestic foundations enter 2% of line 27b. Exempt foreign organizations enter 4% of Part I, line 12, col. (b) 2 Tax under section 511 (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 68. 3 Add lines 1 and 2 0. 4 Subtitle A (income) tax (domestic section 4947(a)(1) trusts and taxable foundations only. Others enter -0-) 4 68. Tax based on investment income. Subtract line 4 from line 3. If zero or less, enter -0-5 6 Credits/Payments: 43 a 2009 estimated tax payments and 2008 overpayment credited to 2009 b Exempt foreign organizations - tax withheld at source 6b c Tax paid with application for extension of time to file (Form 8868) 6c d Backup withholding erroneously withheld 6d 43. 7 Total credits and payments. Add lines 6a through 6d 8 Enter any penalty for underpayment of estimated tax. Check here \_\_\_\_ if Form 2220 is attached 8 25. 9 Tax due. If the total of lines 5 and 8 is more than line 7, enter amount owed 9 10 Overpayment. If line 7 is more than the total of lines 5 and 8, enter the amount overpaid 10 11 Enter the amount of line 10 to be: Credited to 2010 estimated tax Refunded Part VII-A | Statements Regarding Activities Yes No 1a During the tax year, did the foundation attempt to influence any national, state, or local legislation or did it participate or intervene in 1a any political campaign? X b Did it spend more than \$100 during the year (either directly or indirectly) for political purposes (see instructions for definition)? 1b If the answer is "Yes" to 1a or 1b, attach a detailed description of the activities and copies of any materials published or distributed by the foundation in connection with the activities X c Did the foundation file Form 1120-POL for this year? 1c d Enter the amount (if any) of tax on political expenditures (section 4955) imposed during the year: 0. 0 • (2) On foundation managers. ▶ \$ e Enter the reimbursement (if any) paid by the foundation during the year for political expenditure tax imposed on foundation managers. > \$ 0. 2 Has the foundation engaged in any activities that have not previously been reported to the IRS? 2 X If "Yes," attach a detailed description of the activities 3 Has the foundation made any changes, not previously reported to the IRS, in its governing instrument, articles of incorporation, or bylaws, or other similar instruments? If "Yes," attach a conformed copy of the changes 4a Did the foundation have unrelated business gross income of \$1,000 or more during the year? 4a b If "Yes," has it filed a tax return on Form 990-T for this year? N/A 4b X 5 5 Was there a liquidation, termination, dissolution, or substantial contraction during the year? If "Yes," attach the statement required by General Instruction T. 6 Are the requirements of section 508(e) (relating to sections 4941 through 4945) satisfied either: · By language in the governing instrument, or By state legislation that effectively amends the governing instrument so that no mandatory directions that conflict with the state law X 6 remain in the governing instrument? X 7 7 Did the foundation have at least \$5,000 in assets at any time during the year? If "Yes," complete Part II, col. (c), and Part XV 8a Enter the states to which the foundation reports or with which it is registered (see instructions) 
SEE STATEMENT 7 b If the answer is "Yes" to line 7, has the foundation furnished a copy of Form 990-PF to the Attorney General (or designate)

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X

8b

10

of each state as required by General Instruction G? If "No," attach explanation

9 Is the foundation claiming status as a private operating foundation within the meaning of section 4942(j)(3) or 4942(j)(5) for calendar

Did any persons become substantial contributors during the tax year? ir "Yes," attach a schedule listing their names and addresses

year 2009 or the taxable year beginning in 2009 (see instructions for Part XIV)? If "Yes," complete Part XIV

3a Did the foundation hold more than a 2% direct or indirect interest in any business enterprise at any time

4a Did the foundation invest during the year any amount in a manner that would jeopardize its charitable purposes?

Form 4720, to determine if the foundation had excess business holdings in 2009)

had not been removed from jeopardy before the first day of the tax year beginning in 2009?

b if "Yes," did it have excess business holdings in 2009 as a result of (1) any purchase by the foundation or disqualified persons after May 26, 1969; (2) the lapse of the 5-year period (or longer period approved by the Commissioner under section 4943(c)(7)) to dispose of holdings acquired by gift or bequest; or (3) the lapse of the 10-, 15-, or 20-year first phase holding period? (Use Schedule C,

b Did the foundation make any investment in a prior year (but after December 31, 1969) that could jeopardize its charitable purpose that

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Yes X No

N/A

3b

4a

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X

during the year?

THE DUNKIN' DONUTS & BASI				
Form 990-PF (2009) COMMUNITY FOUNDATION, INC	C. 4700 M. D. F	<del> </del>	<u> 26-059378</u>	34 Page <b>6</b>
Part VII-B   Statements Regarding Activities for Which F	orm 4/20 May Be I	Required (contin	ued)	
5a During the year did the foundation pay or incur any amount to:	40.45(-)\0		s X No	
(1) Carry on propaganda, or otherwise attempt to influence legislation (section	, .,		S LAL NO	
(2) Influence the outcome of any specific public election (see section 4955); or	to carry on, directly or indire		es X No	
any voter registration drive?	)		es X No	
<ul><li>(3) Provide a grant to an individual for travel, study, or other similar purposes?</li><li>(4) Provide a grant to an organization other than a charitable, etc., organization</li></ul>		16	is La NU	
509(a)(1), (2), or (3), or section 4940(d)(2)?	i described iii section	□ v <sub>4</sub>	es X No	
(5) Provide for any purpose other than religious, charitable, scientific, literary,	or educational nurnoses, or t		180	
the prevention of cruelty to children or animals?	or oddodnonar purposos, or		es X No	
b If any answer is "Yes" to 5a(1)-(5), did any of the transactions fail to qualify und	er the exceptions described			
section 53.4945 or in a current notice regarding disaster assistance (see instruc			N/A 5	ь
Organizations relying on a current notice regarding disaster assistance check he				
c If the answer is "Yes" to question 5a(4), does the foundation claim exemption fr		ined		
expenditure responsibility for the grant?			es 🔲 No	
If "Yes," attach the statement required by Regulations section 53 4945				
6a Did the foundation, during the year, receive any funds, directly or indirectly, to p	ay premiums on			
a personal benefit contract?		Ye	s X No	
<b>b</b> Did the foundation, during the year, pay premiums, directly or indirectly, on a po	ersonal benefit contract?		_ <del>[</del> 6	b X
If "Yes" to 6b, file Form 8870.				
7a At any time during the tax year, was the foundation a party to a prohibited tax sl	nelter transaction?	Ye	es 🗶 No 📙	
b If yes, did the foundation receive any proceeds or have any net income attributa				'b
Part VIII Information About Officers, Directors, Truste Paid Employees, and Contractors	ees, Foundation Ma	inagers, Highly	y	
1 List all officers, directors, trustees, foundation managers and their of	compensation.			
	(b) Title, and average	(c) Compensation	(d) Contributions to employee benefit plans and deferred	(e) Expense account, other
(a) Name and address	hours per week devoted to position	(If not paid, enter -0-)	and deferred compensation	allowances
SEE STATEMENT 9		50,000.	0.	0.
2 Compensation of five highest-paid employees (other than those inc	luded on line 1), If none.	enter "NONE."	<u>                                     </u>	
	(b) Title, and average		(d) Contributions to employee benefit plans	(e) Expense
(a) Name and address of each employee paid more than \$50,000	hours per week devoted to position	(c) Compensation	and deferred compensation	account, other allowances
NONE				
		<u>                                     </u>		
			<u> </u>	
Total number of other employees paid over \$50,000	<del> </del>			0 9 <b>90-PF</b> (2009)
			ronn	/SU-1 1 (2009)

Part VIII Information About Officers, Directors, Trustees, Four Paid Employees, and Contractors (continued)	indation Managers, Highly	
3 Five highest-paid independent contractors for professional services. If none,	enter "NONE."	
(a) Name and address of each person paid more than \$50,000	(b) Type of service	(c) Compensation
NONE		
	<del> </del>	
Total number of others receiving over \$50,000 for professional services		<u>▶</u> 0
Part IX-A Summary of Direct Charitable Activities		
List the foundation's four largest direct charitable activities during the tax year. Include relevant number of organizations and other beneficiaries served, conferences convened, research paper	statistical information such as the	Expenses
27.7	s produced, etc.	
1N/A	<del></del>	
2 · F · /	•	
2		
3		
4		<del></del>
Part IX-B   Summary of Program-Related Investments		
Describe the two largest program-related investments made by the foundation during the tax years.	ear on lines 1 and 2.	Amount
1 <u>N/A</u>		
		·
2		
All other program-related investments. See instructions.		
3		
Total. Add lines 1 through 3	<b>&gt;</b>	0.

P	art X Minimum Investment Return (All domestic foundations must complete this part. Foreign four	dations	, see instructions.)
1	Fair market value of assets not used (or held for use) directly in carrying out charitable, etc., purposes:		
а	Average monthly fair market value of securities	1a	0.
b	Average of monthly cash balances	1b	1,030,763.
C	Fair market value of all other assets	1c	6,658.
d	Total (add lines 1a, b, and c)	1d	1,037,421.
е	Reduction claimed for blockage or other factors reported on lines 1a and		
	1c (attach detailed explanation) 1e 0 •		
2	Acquisition indebtedness applicable to line 1 assets	2	0.
3	Subtract line 2 from line 1d	3	1,037,421.
4	Cash deemed held for charitable activities. Enter 1 1/2% of line 3 (for greater amount, see instructions)	4	15,561.
5	Net value of noncharitable-use assets. Subtract line 4 from line 3. Enter here and on Part V, line 4	5	1,021,860.
6	Minimum investment return. Enter 5% of line 5	6	51,093.
P	art XI  Distributable Amount (see instructions) (Section 4942(j)(3) and (j)(5) private operating foundations and foreign organizations check here  and do not complete this part.)	d certain	
1	Minimum investment return from Part X, line 6	1	51,093.
	Tax on investment income for 2009 from Part VI, line 5		
	Income tax for 2009. (This does not include the tax from Part VI.)	İ	
C	Add lines 2a and 2b	2c	68.
3	Distributable amount before adjustments. Subtract line 2c from line 1	3	51,025.
4	Recoveries of amounts treated as qualifying distributions	4	0.
5	Add lines 3 and 4	5	51,025.
6	Deduction from distributable amount (see instructions)	6	0.
7	Distributable amount as adjusted. Subtract line 6 from line 5. Enter here and on Part XIII, line 1	7	51,025.
÷			<u> </u>
	art XII Qualifying Distributions (see instructions)		
1	Amounts paid (including administrative expenses) to accomplish charitable, etc., purposes:		040 044
а		1a	918,211.
b	Program-related investments - total from Part IX-B	1b	0.
2	Amounts paid to acquire assets used (or held for use) directly in carrying out charitable, etc., purposes	2	
3	Amounts set aside for specific charitable projects that satisfy the:		
а	• • •	3a	
b		3b	
4	Qualifying distributions. Add lines 1a through 3b. Enter here and on Part V, line 8, and Part XIII, line 4	4	918,211.
5	Foundations that qualify under section 4940(e) for the reduced rate of tax on net investment		_
	income. Enter 1% of Part I, line 27b	5	0.
6	Adjusted qualifying distributions. Subtract line 5 from line 4	6	918,211.
	Note The amount on line 6 will be used in Part V, column (b), in subsequent years when calculating whether the foundation of	qualifies f	or the section
	4940(e) reduction of tax in those years.		

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Part XIII Undistributed Income (see instructions)

	(a) Corpus	(b) Years prior to 2008	(c) 2008	(d) 2009
1 Distributable amount for 2009 from Part XI,	·	· · · · · · · · · · · · · · · · · · ·		
line 7				51,025.
2 Undistributed income, if any, as of the end of 2009				
a Enter amount for 2008 only			0.	
b Total for prior years:				
,,		0.		
3 Excess distributions carryover, if any, to 2009:				
a From 2004				
<b>b</b> From 2005				
c From 2006				
d From 2007 23,190.				
e From 2008 1,509,416.	4 500 606			
f Total of lines 3a through e	1,532,606.			
4 Qualifying distributions for 2009 from				
Part XII, line 4: ►\$ 918,211.			0	
a Applied to 2008, but not more than line 2a		<del></del>	0.	
<b>b</b> Applied to undistributed income of prior		٠, د		
years (Election required - see instructions)		0.		
c Treated as distributions out of corpus	010 211			
(Liection required - See man denois)	918,211.			0.
d Applied to 2009 distributable amount e Remaining amount distributed out of corpus	0.			
5 Excess distributions carryover applied to 2009	51,025.			51,025.
(If an amount appears in column (d), the same amount must be shown in column (a) )	31,023.			31,023.
6 Enter the net total of each column as indicated below:				
Corpus Add lines 3f, 4c, and 4e Subtract line 5	2,399,792.	·		
<b>b</b> Prior years' undistributed income. Subtract				
line 4b from line 2b		0.		
c Enter the amount of prior years' undistributed income for which a notice of deficiency has been issued, or on which the section 4942(a) tax has been previously assessed		0.		
d Subtract line 6c from line 6b. Taxable				
amount - see instructions		0.		
e Undistributed income for 2008. Subtract line				
4a from line 2a. Taxable amount - see instr.			0.	
f Undistributed income for 2009. Subtract			-	
lines 4d and 5 from line 1. This amount must				
be distributed in 2010				0.
7 Amounts treated as distributions out of				
corpus to satisfy requirements imposed by				
section 170(b)(1)(F) or 4942(g)(3)	0.	<del></del>		
8 Excess distributions carryover from 2004				
not applied on line 5 or line 7	0.			
9 Excess distributions carryover to 2010.				
Subtract lines 7 and 8 from line 6a	2,399,792.			
10 Analysis of line 9:				
a Excess from 2005				
<b>b</b> Excess from 2006				
c Excess from 2007				
d Excess from 2008 1,481,581.				
e Excess from 2009 918,211.	** SEE STATE	MENT 10		Form <b>990-PF</b> (2009)

SEE STATEMENT 11 b The form in which applications should be submitted and information and materials they should include: c Any submission deadlines:

d Any restrictions or limitations on awards, such as by geographical areas, charitable fields, kinds of institutions, or other factors:

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Part XV Supplementary Information	n (continued)			
3 Grants and Contributions Paid During the	fear or Approved for Future F	Payment		
Recipient  Name and address (home or business)	If recipient is an individual, show any relationship to any foundation manager or substantial contributor	Foundation status of	Purpose of grant or contribution	Amount
	or substantial contributor	recipient		
a Paid during the year				
SEE STATEMENT 12				
Total			<b>▶</b> 3a	522,748
b Approved for future payment				
Total SEE STATEMENT 13			<b>▶</b> 3b	231,500

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Part XVI-A **Analysis of Income-Producing Activities** 

nter gross amounts unless otherwise indicated.	Unrelate	Unrelated business income		ded by section 512, 513, or 514	(e)
1 Program service revenue:	(a) Business code	( <b>b)</b> Amount	Exclu- sion code	(d) Amount	Related or exempt function income
	Code	<u> </u>	1000		
ab	-	<del> </del>	╁──		·
			+ —		
<u> </u>					· · · · · · · · · · · · · · · · · · ·
d	1		+		
e	-		<del> </del>		
Fees and contracts from government agencies			┼		<del>, "</del> "
2 Membership dues and assessments			1		
3 Interest on savings and temporary cash					
investments			14	3,398.	
4 Dividends and interest from securities			1	3,333	
5 Net rental income or (loss) from real estate:	-		1		
a Debt-financed property			<b>†</b>		
b Not debt-financed property					
6 Net rental income or (loss) from personal					
property	-				
7 Other investment income			1		
8 Gain or (loss) from sales of assets other					
than inventory	i				
9 Net income or (loss) from special events					
O Gross profit or (loss) from sales of inventory					
1 Other revenue:					
a					
b	_	<del></del> -			
C	_	<del></del>	<u> </u>		
d					
e	_				
2 Subtotal. Add columns (b), (d), and (e)		0.	<u></u>	3,398.	0.
3 Total. Add line 12, columns (b), (d), and (e)				13	3,398.
See worksheet in line 13 instructions to verify calculations.)					
Part XVI-B Relationship of Activities	to the Acc	omplishment of E	xemp	t Purposes	
Line No.   Cyplain halow how each activity for which inc	ome is reported	un column (a) of Dort VIII	\ control	hutad importantly to the secon	anlinhment of
Explain below how each activity for which inc the foundation's exempt purposes (other tha			A COILLI	buted importantly to the accom	iplistifient of
with the state of	by providing to	mao tor odorr parpoccojs			
		······································			
	-				
	<u> </u>	<u> </u>			
		·			
					······································
					·
0	•				

Pa	art XVII	Information Re Exempt Organ		ers To a	and Transactions a	ind Relationsh	ips With Noncha	ritable	9	<u></u>
1	Did the org			he followin	g with any other organization	on described in section	on 501(c) of		Yes	No
-	-	•			7, relating to political organ					
a	•	rom the reporting founda								
	(1) Cash	, 3			•			1a(1)		х
	(2) Other a	assets						1a(2)		Х
b	Other trans									
-		of assets to a noncharital	ble exempt organization					1b(1)		Lx_
	٠,,	ases of assets from a no						1b(2)		Х
	` '	of facilities, equipment,						1b(3)		Х
	· •	ursement arrangements						1b(4)		Х
		or loan guarantees						1b(5)		Х
	• •	mance of services or me	mbership or fundraising	solicitatio	ns			1b(6)		Х
C		facilities, equipment, ma						1c		х
	_	·	-		dule. Column (b) should alv	ways show the fair m	arket value of the goods,	other as:	sets,	
					ed less than fair market valu					
	column (d)	the value of the goods,	other assets, or services	s received.						
(a)	Line no (	b) Amount involved	(c) Name of no	ncharitable	exempt organization	(d) Description	of transfers, transactions, and	sharing ai	rangeme	nts
				N/A						
			<u></u>							
					·					
						1				
					-					
						<u> </u>				
2a			-		or more tax-exempt organi	zations described	_	_		_
		501(c) of the Code (other	,	) or in sect	ion 527?		L	Yes	X	No
_ <u>b</u>	If Yes, co	mplete the following sch			(h) Tura of augustica	,	Noncombon of colotions	h.n.		
		(a) Name of org	janization		(b) Type of organization	(	c) Description of relations	nip		
		N/A	<del></del>							
									-	
				,	<del></del>					
								_		
$\neg$	Linder penaltie	es of persury. I declare that I h	save examined this return in	cluding acco	mpanying schedules and staten	lents and to the best of	my knowledge and belief, it is	true, corri	act.	
					all information of which preparer		,,	,	,	
		Kan Co			14/2/11)	<b>№</b> СО_СИХ	TDMAN			
اع	Signatu	ire of officer or trustee	<del></del>		Date	Title	IRMAN			
Sign Here	<del></del>	······································	1	7	Jako .		ck if Prepar	er's identi	ying nun	nber
틼		parer's hature	1/1/1/	trans		8/03/10 em			-	
ଊ	프립스	/ // // // // // // // // // // // // /	LAND ALBRE	CHT &			EIN D			
	로 등 등 # **#		ORBES ROAD			, பபட	LIN F			
	addre			02184	/		Phone no. 781 -	356-	200	0
	.1		<u></u>	<u> </u>				<del></del>	<u> </u>	

### Schedule B

(Form 990, 990-EZ, or 990-PF)

Department of the Treasury Internal Revenue Service

Name of the organization

## **Schedule of Contributors**

► Attach to Form 990, 990-EZ, or 990-PF.

OMB No 1545-0047

2009

Employer identification number

	HE DUNKIN' DONUTS & BASKIN-ROBBINS OMMUNITY FOUNDATION, INC.	26-0593784
Organization type (check		20-0393764
Files of	0.45	
Filers of:	Section:	
Form 990 or 990-EZ	501(c)( ) (enter number) organization	
	4947(a)(1) nonexempt charitable trust not treated as a private foundation	on
	527 political organization	
Form 990-PF	X 501(c)(3) exempt private foundation	
-	4947(a)(1) nonexempt chantable trust treated as a private foundation	
	501(c)(3) taxable private foundation	
	is covered by the <b>General Rule</b> or a <b>Special Rule</b> . c)(7), (8), or (10) organization can check boxes for both the General Rule and a S	pecial Rule. See instructions
General Rule		
_	on filing Form 990, 990-EZ, or 990-PF that received, during the year, \$5,000 or molete Parts I and II.	nore (in money or property) from any one
Special Rules		
509(a)(1) and 170	(c)(3) organization filing Form 990 or 990-EZ that met the 33 1/3% support test of (b)(1)(A)(vi), and received from any one contributor, during the year, a contribution (i) Form 990, Part VIII, line 1h or (ii) Form 990-EZ, line 1 Complete Parts I and II.	on of the greater of (1) \$5,000 or (2) 2%
aggregate contrib	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any coutions of more than \$1,000 for use exclusively for religious, chantable, scientific cruelty to children or animals Complete Parts I, II, and III	
contributions for the lifthis box is checon purpose. Do not contribute the contributions of the contributions for t	(c)(7), (8), or (10) organization filing Form 990 or 990-EZ that received from any cuse exclusively for religious, charitable, etc., purposes, but these contributions ciked, enter here the total contributions that were received during the year for an complete any of the parts unless the <b>General Rule</b> applies to this organization belie, etc., contributions of \$5,000 or more during the year	did not aggregate to more than \$1,000 exclusively religious, chantable, etc ,
but it must answer "No" or	that is not covered by the General Rule and/or the Special Rules does not file Son Part IV, line 2 of its Form 990, or check the box on line H of its Form 990-EZ, or ling requirements of Schedule B (Form 990, 990-EZ, or 990-PF).	, , , , , , , , , , , , , , , , , , , ,
LHA For Privacy Act and	I Paperwork Reduction Act Notice, see the Instructions	Schedule B (Form 990, 990-EZ, or 990-PF) (2009)

for Form 990, 990-EZ, or 990-PF.

Name of organization

THE DUNKIN' DONUTS & BASKIN-ROBBINS

COMMUNITY FOUNDATION, INC.

26-0593784

Employer identification number

Part I	Contributors (see instructions)		-
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
1	ASHAPURA, INC ET AL  4767 ALLENTOWN ROAD  SUITLAND, MD 02746	\$ 60,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
2	JAI MELAIDI, CORP  4800 WEST ATLANTIC AVENUE  DELRAY BEACH, FL 33498	\$5,000.	Person X Payroll Noncash (Complete Part II of there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
3	ARAMARK  1101 MARKET STREET  PHILADELPHIA, PA 19107	\$10,000.	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
4		\$	Person X Payroll
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there is a noncash contribution.)
(a) No.	(b) Name, address, and ZIP + 4	(c) Aggregate contributions	(d) Type of contribution
		\$	Person Payroll Noncash (Complete Part II if there

FORM 990-PF . INTEREST ON SAVI	NGS AND TEM	PORARY CASH IN	NVESTMENTS	STATEMENT	<u> </u>
SOURCE				AMOUNT	
BANK OF CANTON			_	3,39	98.
TOTAL TO FORM 990-PF, PART I,	LINE 3, CO	LUMN A	=	3,39	98.
FORM 990-PF	LEGAL	FEES		STATEMENT	2
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
LEGAL -	35,000.	0.	-	40,50	00.
TO FM 990-PF, PG 1, LN 16A =	35,000.	0.		40,50	00.
FORM 990-PF	ACCOUNTI	NG FEES		STATEMENT	3
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME		
ACCOUNTING	12,690.	0.		15,1	90.
TO FORM 990-PF, PG 1, LN 16B	12,690.	0.		15,1	90.
FORM 990-PF C	THER PROFES	SIONAL FEES		STATEMENT	4
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVEST- MENT INCOME	(C) ADJUSTED NET INCOME	(D) CHARITA PURPOSI	
FOUNDATION MANAGEMENT ASSOCIATES - CONTROLLER	18,000.	0.		18,0	00.
TO FORM 990-PF, PG 1, LN 16C	18,000.	0.		18,0	00.

7

STATEMENT

FORM 990-PF .	OTHER E	XPENSES		·	STATEMENT 5		
DESCRIPTION	(A) EXPENSES PER BOOKS	(B) NET INVE MENT INC		(C) ADJUSTED NET INCOM			
BANK SERVICE CHARGES INSURANCE EXPENSE OFFICE EXPENSE POSTAGE & DELIVERY TELEPHONE MANAGEMENT FEES DUES & SUBSCRIPTIONS FUNDRAISING LICENSES ADVERTISING BAD DEBT EXPENSE - PLEDGES  TO FORM 990-PF, PG 1, LN 23	2,650. 4,670. 2,300. 245. 25. 20,000. 500. 79,820. 5,060. 105,471. 100,000.		0. 0. 0. 0. 0. 0.		20,0	70. 00. 45. 25. 00. 33. 60.	
FORM 990-PF	OTHER	ASSETS			STATEMENT	6	
DESCRIPTION		NING OF K VALUE		OF YEAR K VALUE	FAIR MARKE VALUE	T	
DUE FROM RELATED PARTY	<u> </u>	0.		3,750.	3,7	50.	
TO FORM 990-PF, PART II, LINE	15	0.		3,750.	3,7	50.	

#### STATES

FORM 990-PF

MA, AL, AK, AZ, AR, CA, CO, CT, DC, FL, GA, IL, KS, KY, ME, MD, MI, MN, MS, NH, NJ, NM, NY, NC, ND OH, OK, OR, PA, RI, SC, TN, UT, VA, WA, WV, WI

LIST OF STATES RECEIVING COPY OF RETURN

THE DUNKIN' DONU'I	'S & BASKIN-ROB	BINS COMM			6-0593784 
FORM 990-PF .		STANTIAL CONTRIE VII-A, LINE 10	UTORS	STAT	EMENT 8
NAME OF CONTRIBUTOR	1	ADDRESS			-
ASHAPURA, INC	_	4767 ALLENTOW SUITLAND, MD			
FORM 990-PF F		T OF OFFICERS, D FOUNDATION MANA		STAT	EMENT 9
NAME AND ADDRESS		TITLE AND AVRG HRS/WK		EMPLOYEE BEN PLAN CONTRIB	EXPENSE
MITCH COHEN 130 ROYALL STREET CANTON, MA 02021		DIRECTOR 10.00	0.	0.	0.
SHEILA PATEL 130 ROYALL STREET CANTON, MA 02021		TREASURER 10.00	0.	0.	0.
GARY HECKEL 130 ROYALL STREET CANTON, MA 02021		DIRECTOR 10.00	0.	0.	0.
KAREN RASKOPF 130 ROYALL STREET CANTON, MA 02021		CO-CHAIR 10.00	0.	0.	0.
PAUL LEECH 130 ROYALL STREET CANTON, MA 02021		DIRECTOR 10.00	50,000.	0.	0.
JOSEPH PRAZERES 130 ROYALL STREET CANTON, MA 02021		DIRECTOR 10.00	0.	0.	0.
JIM DAMICONE 130 ROYALL STREET CANTON, MA 02021		DIRECTOR 10.00	0.	0.	0.
ROD VALENCIA 130 ROYALL STREET		DIRECTOR 10.00	0.	0.	0.

130 ROYALL STREET CANTON, MA 02021

THE DUNKIN' DONUTS & BASI	KIN-ROBBINS COMM		26-0	593784
STEPHAN SHELTON 130 ROYALL STREET CANTON, MA 02021	CO-CHAIR 10.00	0.	0.	0.
STEVEN KIM 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
WALTER ERWIN 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
DAVE NAGEL 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
JEFF MILLER 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
SCOTT MURPHY 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
JOHN LUTHER 130 ROYALL STREET CANTON, MA 02021	DIRECTOR 10.00	0.	0.	0.
PATTY HALPIN 130 ROYALL STREET CANTON, MA 02021	SECRETARY 10.00	0.	0.	0.
TOTALS INCLUDED ON 990-PF,	PAGE 6, PART VIII	50,000.	0.	0.

FORM 990-PF . ELECTION UNDER REGULATIONS SECTION 53.4942(A)-3(D)(2) TO TREAT EXCESS QUALIFYING DISTRIBUTIONS AS DISTRIBUTIONS OUT OF CORPUS

STATEMENT 10

PURSUANT TO IRC SECTION 4942(H)(2) AND REGULATION 53.4942(A)-3(D)(2), THE DUNKIN' DONUTS & BASKIN-ROBBINS COMMUNITY FOUNDATION, INC. HEREBY ELECTS TO TREAT CURRENT YEAR QUALIFYING DISTRIBUTIONS IN EXCESS OF THE IMMEDIATELY PRECEDING TAX YEAR'S UNDISTRIBUTED INCOME AS BEING MADE OUT OF CORPUS.

SIGNED		 DATE
	(NAME AND TITLE)	

20

FORM 990-PF . GRANT APPLICATION SUBMISSION INFORMATION PART XV, LINES 2A THROUGH 2D

STATEMENT 11

NAME AND ADDRESS OF PERSON TO WHOM APPLICATIONS SHOULD BE SUBMITTED

CHRISTINE RILEY C/O DUNKIN' DONUTS & BASKIN-ROBBINS COMMUNITY FOUNDATION 130 ROYALL STREET CANTON, MA 02021

TELEPHONE NUMBER

781-737-3946

FORM AND CONTENT OF APPLICATIONS

THE REQUEST FOR PROPOSAL (RFP) APPLICATION CAN BE FOUND AT WWW.DUNKINBRANDS.COM/FOUNDATION

ANY SUBMISSION DEADLINES

AUGUST 31ST OF EACH YEAR

#### RESTRICTIONS AND LIMITATIONS ON AWARDS

GRANT APPLICANTS MUST COMPLY WITH THE FOLLOWING REQUIREMENTS:

- HAVE 501(C)(3) PUBLIC CHARITY STATUS
- SIGNIFICANTLY SUPPORT THE "SERVING THOSE WHO SERVE IN OUR COMMUNITIES -ESPECIALLY WITH A FOCUS ON EMERGENCY RESPONSE ORGANIZATIONS AND CHARITIES THAT BENEFIT CHILDREN" MISSION
  - SUPPORT REGIONS WHERE WE LIVE AND WORK
  - HAVE NATIONAL PRESENCE, MEASURABLE GOALS AND A TRACK RECORD OF SUCCESS
- LETTERS OF INQUIRY INCLUDING THE APPLICANTS'S HISTORY, GOALS, AND PROJECT OBJECTIVES MUST BE SUBMITTED BY JUNE 30TH OF EACH YEAR. SELECTED ORGANIZATIONS WILL BE CONTACTED TO SUBMIT A FULL PROPOSAL DUE IN DECEMBER.

STATEMENT 12

FORM 990-PF .

	DURING THE YEAR	———		
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT		AMOUNT	
CHILDREN'S HOSPITALS - PHILADELPHIA REGION - VARIOUS 34 STREET & CIVIC CENTER BLVD PHILADELPHIA, PA 109104	OPERATING EXPENSES	501(C)(3)	49,893.	
CITIZENS CRIME COMMISSION 1518 WALNUT STREET, STE 902 PHILADELPHIA, PA 19102	OPERATING EXPENSES	501(C)(3)	1,500.	
CRIME STOPPERS COUNCIL OF BROWARD COUNTY 2601 W BROWARD BLVD FORT LAUDERDALE, FL 33312	OPERATING EXPENSES	501(C)(3)	11,000.	
DANA FARBER CANCER INSTITUTE 44 BINNEY STREET BOSTON, MA 02445	OPERATING EXPENSES	501(C)(3)	65,456.	
FOOD BANK FOR NEW YORK CITY 39 BROADWAY, 10TH FLOOR NEW YORK, NY 10006	OPERATING EXPENSES	501(C)(3)	5,000.	
HOMES FOR OUR TROOPS 6 MAIN STREET TAUNTON , MA 02780	OPERATING EXPENSES	501(C)(3)	176,054.	
MAKE A WISH FOUNDATION - VARIOUS 4742 NORTH 24TH ST, SUITE 400 PHOENIX , AZ 85016	OPERATING EXPENSES	501(C)(3)	19,076.	
MINEOLA VOLUNTEER AMBULANCE CORPS 170 ELM PLACE MINNEOLA, NY	OPERATING EXPENSES	501(C)(3)	2,000.	

GRANTS AND CONTRIBUTIONS

11501

THE DUNKIN' DONUTS & BASKIN-ROBBINS COMM		26-0593784
NATIONAL VOLUNTEER FIRE COUNCIL 7852 WALKER DRIVE, STE 450 OPERATING EXP GREENBELT, MD 20770	501(C)(3) PENSES	100,000.
PERKINS SCHOOL FOR THE BLIND 175 NORTH BEACON STREET OPERATING EXP WATERTOWN, MA 02472	501(C)(3) PENSES	75,000.
PHILABUNDANCE FOOD BANK 594 BROADWAY NEW YORK, NY 10012 OPERATING EXP	501(C)(3) PENSES	5,769.
SOUTH FLORIDA CRIME COMMISSION 150 SOUTH PINE ISLAND ROAD, STE OPERATING EXP 400 PLANTATION, FL 33324	501(C)(3) PENSES	5,000.
TRIBUTE WORLD TRADE CENTER 120 LIBERTY STREET NEW YORK, NY OPERATING EXP 10006	501(C)(3) PENSES	7,000
TOTAL TO FORM 990-PF, PART XV, LINE 3A		522,748.

The state of the s	AND CONTRIBUTIONS OFOR FUTURE PAYMENT	STAT	EMENT 13
RECIPIENT NAME AND ADDRESS	RECIPIENT RELATIONSHIP AND PURPOSE OF GRANT	RECIPIENT STATUS	AMOUNT
AMERICAN RED CROSS - JERSEY COAST 1540 WEST PARK AVENUE TINTON FALLS, NJ 07724	OPERATING EXPENSES	501(C)(3)	10,000.
BOYS & GIRLS CLUBS OF MONMOUTH COUNTY, NY 1201 MONROE AVENUE ASBURY PARK, NJ 07712	OPERATING EXPENSES	501(C)(3)	5,000.
DO SOMETHING 24-32 UNION SQUARE EAST, 4TH FLOOR NEW YORK, NY 10003	OPERATING EXPENSES	501(C)(3)	25,000.
FEEDING AMERICA 35 EAST WACKER DRIVE, STE 2000 CHICAGO, IL 60601	OPERATING EXPENSES	501(C)(3)	175,000.
PHILADELPHIA CITIZENS FOR CHILDREN AND YOUTH 7 BENJAMIN FRANKLIN PARKWAY PHILADELPHIA, PA 19103	OPERATING EXPENSES	501(C)(3)	1,500.
POLICE ATHLETIC LEAGUE OF PHILADELPHIA 2524 EAST CLEARFIELD STREET PHILADELPHIA, PA 19134	OPERATING EXPENSES	501(C)(3)	15,000.
TOTAL TO FORM 990-PF, PART XV, L	INE 3B		231,500.

### Form **8868**

(Rev. April 2009)

Department of the Treasury Internal Revenue Service

# Application for Extension of Time To File an Exempt Organization Return

File a separate application for each return.

OMB No. 1545-1709

If you are filing for an Automatic 3-Month Extension, complete only Part I and check this box			ightharpoons
If you are filing for an Additional (Not Automatic) 3-Month Extension, complete only Part II (on page 2 of page 2	of this form)		
Do not complete Part II unless you have already been granted an automatic 3-month extension on a previous	usly filed Fo	rm 8868.	
Part I Automatic 3-Month Extension of Time. Only submit original (no copies needed)			
A corporation required to file Form 990-T and requesting an automatic 6-month extension - check this box an	d complete		
Part I only			
All other corporations (including 1120-C filers), partnerships, REMICs, and trusts must use Form 7004 to requ	ast an avtai	sion of time	
to file income tax returns.	COL GIT CALC	ision or time	
Electronic Filing (e-file). Generally, you can electronically file Form 8868 if you want a 3-month automatic ex noted below (6 months for a corporation required to file Form 990-T). However, you cannot file Form 8868 ele (not automatic) 3-month extension or (2) you file Forms 990-BL, 6069, or 8870, group returns, or a composite you must submit the fully completed and signed page 2 (Part II) of Form 8868. For more details on the electrowww.irs.gov/efile and click on e-file for Chanties & Nonprofits.	ctronically i	f (1) you want ated Form 99	the additional 0-T Instead,
Type or Name of Exempt Organization	Emp	loyer identifi	cation number
print THE DUNKIN' DONUTS & BASKIN-ROBBINS		_	
COMMUNITY FOUNDATION, INC.	2	6-0593	784
File by the due date for Number, street, and room or suite no. If a P.O. box, see instructions			
filing your 130 ROYALL STREET			
Instructions City, town or post office, state, and ZIP code. For a foreign address, see instructions			
CANTON, MA 02021			
Check type of return to be filed (file a separate application for each return)			
	4700		
	orm 4720		
	orm 5227 orm 6069		
	orm 8870		
FOIII 990-FF POIII 1041-7A			
FOUNDATION MANAGEMENT ASSOCIATES  • The books are in the care of   • 7 WESTDALE ROAD - CANTON, MA 02021-1	328		
Telephone No ▶ 781-248-5759 FAX No ▶			
If the organization does not have an office or place of business in the United States, check this box			. ▶ □
If this is for a Group Return, enter the organization's four digit Group Exemption Number (GEN)	. If this is fo	r the whole g	roup, check this
box 🕨 🔲 If it is for part of the group, check this box 🕨 🦳 and attach a list with the names and EINs	of all memb	ers the exter	sion will cover.
<del></del>			
1 I request an automatic 3-month (6-months for a corporation required to file Form 990-T) extension of time	ne until		
AUGUST 15, 2010 , to file the exempt organization return for the organization nai	med above	The extension	n
is for the organization's return for:			
▶ X calendar year 2009 or			
tax year beginning, and ending		_	
2 If this tax year is for less than 12 months, check reason Initial return		Change in ac	ccounting period
3a If this application is for Form 990-BL, 990-PF, 990-T, 4720, or 6069, enter the tentative tax, less any			
nonrefundable credits. See instructions	3a	\$	_0.
b If this application is for Form 990-PF or 990-T, enter any refundable credits and estimated			
tax payments made. Include any prior year overpayment allowed as a credit	3b	\$	0.
c Balance Due. Subtract line 3b from line 3a Include your payment with this form, or, if required,			
deposit with FTD coupon or, if required, by using EFTPS (Electronic Federal Tax Payment System).		1	
See instructions.	_3c	\$	0.
Caution. If you are going to make an electronic fund withdrawal with this Form 8868, see Form 8453-EO and	Form 8870	-FO for navm	ent instructions
	. 0.111 007 9	·-	
LHA For Privacy Act and Paperwork Reduction Act Notice, see Instructions.		Form :	<b>3868</b> (Rev. 4-2009)

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